

As a below named inventor, I hereby declare that:

My Residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled INTRALUMINAL GRAFT

the specification of which (check only one item below):

- ☐ Is attached hereto.
- ☐ was filed as United States application
Serial No. _____
on _____
and was amended on _____ (if applicable)
- ☒ was filed as PCT international application
Number PCT/AU94/00586 on September 29, 1994
and was amended under PCT Article 19 on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

Prior Foreign Application(s)			Priority Claimed
<u>PM 1537</u> (Number)	<u>Australia</u> (Country)	<u>30 September 1993</u> (Day/Month/Year Filed)	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
<u> </u> (Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year Filed)	yes <input type="checkbox"/> no <input type="checkbox"/>
<u> </u> (Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year Filed)	yes <input type="checkbox"/> no <input type="checkbox"/>

I hereby claim the benefit under 35, United States Code, § 120 of any United States application(s) or PCT International application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT International filing date of this application:

Application Serial No.
PCT/AU94/00586

Filing Date
29 September 1994

Status
closed

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Raymond Sun, Reg. No. 35,699, Janice Guthrie, Reg. No. 35,170, Michael Schiffer, Reg. No. 30,215, Debra D. Condino, Reg. No. 31,007, Bruce M. Carter, Reg. No. 34,792, and Paul C. Flattery, Reg. No. 21,125.

Address all telephone calls to Raymond Sun at telephone no. (714) 440-5341.

Address all correspondence to Raymond Sun, Baxter Healthcare Corporation, P.O. Box 15210, Irvine, CA 92713-5210.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Geoffrey H. White

Inventor's signature: Geoffrey H. White

Date: 24th May, 1995

Residence: 22 Nicholson Street, East Balmain, New South Wales, Australia 2041

Citizenship: Australia

Post Office Address: same

Full name of second joint inventor, if any: Weiyun Yu

Inventor's signature: Wei Yu

Date: _____

Residence: 34/2 Friend Avenue, Five Dock, New South Wales, Australia 2046

Citizenship: Australia

Post Office Address: same

As a below named inventor, I hereby declare that:

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled INTRALUMINAL GRAFT

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Prior Foreign Application(s)

PM 1537
(Number)

Australia
(Country)

30 September 1993
(Day/Month/Year Filed)

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yes ☒ no ☐

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(Day/Month/Year Filed)

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(Country)

(Day/Month/Year Filed)

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Full name of sole or first inventor: Geoffrey H. White

Inventor's signature: 2nd decl.

Date: _____

Residence: 22 Nicholson Street, East Balmain, New South Wales, Australia 2041

Citizenship: Australia

Post Office Address: same

Full name of second joint inventor, if any: Welyun Yu

Inventor's signature: x 

Date: 28th May 1995

Residence: 34/2 Friend Avenue, Five Dock, New South Wales, Australia 2046

Citizenship: Australia

Post Office Address: same

DOCKET NO. EDWA0015UCO/US

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

IN RE APPLICATION OF: Geoffrey White, et al. :EXAMINER: M. Milano

SERIAL NO: 09/478,352

FILED: January 6, 2000

:GROUP ART UNIT: 3738

TITLE: Intraluminal Graft

REVOCATION AND NEW POWER OF ATTORNEY

I hereby revoke all prior powers of attorney and appoint Richard A. Neifeld, Registration No. 35,299; Irina Zemel, Registration No. 43,402; Ruay Ho, Registration No. 48,110; Lena I. Vinitskaya No. 39,448; Debra D. Condino 31,007; and John Christopher James No. 40, 660 attorneys of record in this application. I request that all correspondence be sent to the firm of NEIFELD IP LAW, P.C. whose post office address is: 2001 Jefferson Davis Highway, Suite 1001, Arlington, Virginia 22202, whose PTO address code is 31518, and corresponding bar code is:



31518

PATENT TRADEMARK OFFICE

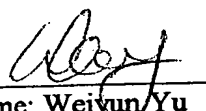
CERTIFICATION UNDER 37 C.F.R. 3.73(b)

I, the undersigned, certify that I am an individual empowered to act on behalf of Endogad Research Pty Limited, the legal assignee of the entire right, title and interest of the above-identified application by virtue of assignments from the inventors recorded at the following reel/frame numbers 7060/0383. I have reviewed the assignment documents, and I know that ownership of this application is vested in Endogad Research Pty Limited.

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

I am authorized to act on behalf of Endogad Research Pty Limited.

Date: 31 JULY 2002

Signature: 
Printed Name: Wei Yun Yu
Title: Officer

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